

APPLICATION NO. \_\_\_\_\_

**TO: ISDS PROGRAM  
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT  
OFFICE OF WATER RESOURCES, PERMITTING SECTION, 235 PROMENADE STREET  
PROVIDENCE, RI 02908**

**SUBJECT: REQUEST FOR VARIANCE(S) TO "SD – RULES AND REGULATIONS ESTABLISHING MINIMUM STANDARDS RELATING TO LOCATION, DESIGN, CONSTRUCTION AND MAINTENANCE OF INDIVIDUAL SEWAGE DISPOSAL SYSTEMS" AS AMENDED AS OF JANUARY 17, 2002.**

Attached please find an application, plans and specifications for an individual sewage disposal system which does not fully comply with the above rules and regulations. Accept this completed form as my request for variance(s) from said rules and regulations.

(NOTE: Complete all data and submit this form in duplicate with proper fee as indicated below.)

Check made payable to RI General Treasurer

Main complete package to:

Rhode Island Department of Environmental Management  
Office of Water Resources, Permitting Section  
235 Promenade Street  
Providence, RI 02908-5767

FEE CHARGE ☐ \$300.00 – Residential or commercial system.

Property Owner(s)

Phone

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address \_\_\_\_\_

City or Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Site Location (Street) \_\_\_\_\_

Plat \_\_\_\_\_ Lot \_\_\_\_\_ City/Town \_\_\_\_\_

Variance Requested (Use additional sheets if necessary)

- 1) Specify each variance requested and explain why the design cannot comply with the regulation involved. (Use regulation section numbers).
  
  
  
  
  
  
  
  
  
  
- 2) Provide supportive data as to why the granting of each variance will not interfere with the proper operation of the proposed sewage disposal system.
  
  
  
  
  
  
  
  
  
  
- 3) Please answer the following questions (use additional sheets if necessary).  
If answers to a ,b, c, d, or e below are None, N/A or No Effect, explain why.

- a) What will be the effect of the proposed system on public health;
- b) What will be the effect of the proposed system on any drinking water supply or tributary thereto, including, but not limited to, the cumulative impacts of the system to the surrounding area as described in SD 20.02(g);
- c) What will be the effect of the proposed system on any body of water including, but not limited to, impacts on groundwater and/or surface water quality and to the ability of the water body to support and/or maintain plant and wildlife as well as other designated water uses;
- d) What will be the effect of the proposed system on public use and enjoyment of any recreational resource; and
- e) What will be the effect of the proposed system on surrounding persons or property as a potential cause of any public or private nuisance:

LIST HERE ANY SUPPLEMENTAL DOCUMENTS OR OTHER INFORMATION SUPPORTING THE VARIANCE REQUEST:

**CERTIFICATION**                      Date Certified \_\_\_\_\_

As the designer, I hereby certify that I have completed the foregoing and recommend that the variance be granted.

Title \_\_\_\_\_ Designer License # \_\_\_\_\_ Signature \_\_\_\_\_

As the property owner(s), I hereby certify that I have reviewed this completed form and further, I am requesting the aforementioned variances.

Owner(s) Signature \_\_\_\_\_  
 \_\_\_\_\_

-----  
**OFFICE USE ONLY**

**Variance Decision**

\_\_\_\_ Variance Granted

**Decision**

\_\_\_\_ Variance Rejected    Decision Date: \_\_\_\_\_

ISDS Program Supervisor or Chief \_\_\_\_\_

**STIPULATIONS:**